FORM D

MANUALLY EXECUTED

U.S. SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

OMB APPROVAL

OMB NUMBER: 3235-0076 Expires: May 31, 2005 Estimated average burden

hours per response . . 16.00

PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR

SEC USE ONLY
Prefix | | Serial

DATE RECEIVED

| - SUNHORM LIMITED OFFERING EXEMPTION | | | | | | |
|--|--|--|--|--|--|--|
| Name of Offering (check if this is an amendment and name has changed, and indicate change.) | C 10053/ | | | | | |
| THE EDDYSTONE FUND, L.P. (name has been changed from The Baker Street Fund, L.P.) | 055531 | | | | | |
| Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment | PROCESSED | | | | | |
| A. BASIC IDENTIFICATION DATA | 11/49/35/35/25 | | | | | |
| 1. Enter the information requested about the issuer | JAN 15 2004 | | | | | |
| Name of Issuer (check if this is an amendment and name has changed, and indicate change.) | THOMSON | | | | | |
| THE EDDYSTONE FUND, L.P. (name has been changed from The Baker Street Fund, L.P.) | FINANCIAL | | | | | |
| Address of Executive Offices (Number and Street, City, State, Zip Code) | Telephone Number (Including Area Code) | | | | | |
| c/o Aegis Capital Partners, LLC, 470 Park Avenue South, 4th Floor South, New York, NY 10016 | (646) 495-7350 | | | | | |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) | Telephone Number (Including Area Code) | | | | | |
| same | same | | | | | |
| Brief Description of Business | | | | | | |
| | FF: (Bit (Bits (BIS) BIS) INC. | | | | | |
| Securities Investment | | | | | | |
| Type of Business Organization | | | | | | |
| corporation limited partnership, already formed other (please specify): | 04038951 | | | | | |
| business trust limited partnership, to be formed | 04030931 | | | | | |
| Actual or Estimated Date of Incorporation or Organization: [1 0] [9 7] Actual Actual Month Year Actual [1 0] [9 7] Actual E | stimated | | | | | |
| Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: [D][E] | | | | | | |
| CN for Canada, FN for other foreign jurisdiction) | | | | | | |
| GENERAL INSTRUCTIONS | | | | | | |
| Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.50 | el et seq. or 15 U.S.C. 77d(6). | | | | | |
| When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address. | | | | | | |
| Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549. | | | | | | |
| Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures. | | | | | | |
| Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and o information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the App SEC. | ffering, any changes thereto, the bendix need not be filed with the | | | | | |
| Filing Fee: There is no federal filing fee. | | | | | | |
| State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form, appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed. | e to be, or have been made. If a | | | | | |
| ATTENTION Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice. | | | | | | |

11169198.01

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General Partner Full Name (Last name first, if individual) Aegis Capital Partners, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 470 Park Avenue South, 4th Floor South, New York, NY 10016 Check Box(es) that Apply: Promoter Principal Sole Member Director General and/or Managing Partner Full Name (Last name first, if individual) Ledwidge, Francis Business or Residence Address (Number and Street, City, State, Zip Code) c/o Aegis Capital Partners, LLC, 470 Park Avenue South, 4th Floor South, New York, NY 10016 Executive Officer Director Check Box(es) that Apply: Promoter Principal General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) c/o Aegis Capital Partners, LLC, 470 Park Avenue South, 4th Floor South, New York, NY 10016 Check Box(es) that Apply: Executive Officer Director Promoter Principal General and/or Managing Partner Full Name (Last name first, if individual) Business of Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Executive Officer ☐ Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Check Box(es) that Apply: Promoter Beneficial Owner Principal Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

| | | | | | B. II | NFORM. | ATION | ABOUT | OFFER | RING | | · | | | |
|--|------------------------------|------------------------------|------------------------------|---------------------------|------------------------------|----------------------------------|------------------------------|------------------------------|-------------------------------|------------------------------|------------------------------|------------------------------|--|--------------|-------------|
| 1. | Has the | issuer sold, | or does the | issuer inte | and to sell, t | o non-accre | dited inves | stors in this | offering? | | | | | | Yes No |
| | | | | | Answei | also in Ap | pendix, Co | lumn 2, if f | iling under | ULOE. | | | | | |
| 2. | | | ım investme ı may be me | | | | | | | • | •••••• | | | *\$ <u>2</u> | 000,000 |
| 3. | Does the | offering p | ermit joint | ownership (| of a single i | ınit? | | | | | | | ************ | | Yes No |
| 4. | solicitati dealer re | on of purch gistered w | hasers in co | nnection w and/or with | ith sales of h a state or | securities in states, list tl | n the offeri he name of | ng. If a per the broker | son to be lis or dealer. I | sted is an as f more than | ssociated pe | rson or age | nilar remune int of a brok listed are as NONE | er or | |
| Full Nam | e (Last nar | ne first, if | individual) | | | | | | | | | | | | |
| Business | or Resider | ice Addres | s (Number a | and Street, | City, State, | Zip Code) | | _ | | | | | | | |
| Name of | Associated | Broker or | Dealer | | | . <u></u> | . | | | | | | | | |
| | | | | | | | | | | | | | | | |
| States in | Which Per | son Listed | Has Solicite | ed or Intend | s to Solicit | Purchasers | | | | | | | | | |
| (Check ' | | | individual 5 | | | | | | | | | | | 🔲 A | All States |
| | [AL] [IL] | [AK] [IN] | [AZ] [IA] | [AR] [KS] | [CA] [KY] | [CO] [LA] | [CT] [ME] | [DE] [MD] | [DC] [MA] | [FL] [MI] | [GA] [MN] | [HI] [MS] | [ID] [MO] | | • |
| | [MT] [RI] | [NE] [SC] | [NV] [SD] | [NH] [TN] | [NJ] [TX] | [NM] [UT] | [NY] [VT] | [NC] [VA] | [ND] [WA] | [OH] [WV] | [OK] [WI] | [OR] [WY] | [PA] [PR] | | |
| Full Nam | e (Last nai | ne first, if | individual) | | | | _ | | | | | | | - | |
| Pusiness | or Resider | ce Addres | s (Number a | and Street | City State | Zin Code) | - | | | - | | <u>-</u> | | | |
| Duginess | OI RUSIGUI | ioo Maares. | o (i vamber e | and on our, | ony, siaio, | · | | • | | | | | | | |
| Name of | Associated | Broker or | Dealer | | | | • | | | | | | | <u></u> | |
| States in | Which Per | son Listed | Has Solicite | ed or Intend | ds to Solicit | Purchasers | | ··· | | | - | | | | |
| (Check | "All States | " or check | individual : | | | | | •••• | | ************ | ••••• | | ************* | 🔲 A | All States |
| n Name of the contract of the | [AL] · [IL] | [AK] [IN] | [AZ] [IA] | [AR] [KS] | ,,, [CA] [KY] | [CO] [LA] | [CT] [ME] | [DE] [MD] | [DC] [MA] | [FL] [MI] | [GA] [MN] | [HI] [MS] | [ID] [MO] - | | 101,111,1 |
| | [MT] [RI] | [NE] [SC] | [NV] [SD] | [NH] [TN] | [NJ] [TX] | [NM] [UT] | [NY] [VT] | [NC] [VA] | [ND] [WA] | [OH] [WV] | [OK] [WI] | [OR] [WY] | [PA] [PR] | | |
| Full Nam | e (Last nai | ne first, if | individual) | | | | | | | | | | | | |
| Business | or Resider | ce Addres | s (Number a | and Street, | City, State, | Zip Code) | | | | | i | | | | |
| | | | ` | | •• | , , | | | | | | | | | |
| Name of | Associated | Broker or | Dealer | _ | | · | | | _ | | | | | | |
| States in | Which Per | son Listed | Has Solicite | ed or Intend | ds to Solicit | Purchasers | | | | | | | | | |
| (Check | "All States | " or check | individual : | States) | •••• | | | | | | ************ | | | 🔲 A | All States |
| • | [AL] [IL] [MT] [RI] | [AK] [IN] [NE] [SC] | [AZ] [IA] [NV] [SD] | [AR] [KS] [NH] | [CA] [KY] [NJ] [TX] | [CO] [LA] [NM] [UT) | [CT] [ME] [NY] [VT] | [DE] [MD] [NC] [VA] | [DC] [MA] [ND] [WA] | [FL] [MI] [OH] [WV] | [GA] [MN] [OK] [WI] | [HI] [MS] [OR] [WY] | [ID] [MO] [PA] [PR] | | |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

| 1. | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. | | |
|----|--|--|--|
| | Type of Security | Aggregate Offering Price | Amount Already Sold |
| | 1) po or boom () | Offering Trice | Solu |
| | Debt | \$ | \$ |
| | Equity | \$ | \$ |
| | ☐ Common ☐ Preferred | | |
| | Convertible Securities (including warrants) | \$ | \$ |
| | Partnership Interests | \$ | \$ |
| | Limited Partnership Interests * Total * | \$200,000,000 \$200,000,000 | \$ <u>7,116,939</u> \$ <u>7,116,939</u> |
| | Answer also in Appendix, Column 3, if filing under ULOE. | \$ <u>200,000,000</u> | 3 <u>7,110,535</u> |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | | Aggregate |
| | | Number | Dollar Amount |
| | | Investors | of Purchases |
| | Accredited Investors | 18 | <u>\$ 7,116,939</u> |
| 3. | Non-accredited Investors | n/a | \$n/a |
| | Total (for filings under Rule 504 only) | | \$ |
| | Answer also in Appendix, Column 4, if filing under ULOE. | | |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. | | |
| | | Type of | Dollar Amount |
| | Type of offering Rule 505 | Security | Sold |
| | Regulation A | GALLET STATE OF THE STATE OF TH | \$ |
| | Rule 504 | | \$ |
| | Total | | \$ |
| 4. | a. Furnish a statement of all expenses in connection with the issuance and distribution of | | Φ |
| 7. | the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | | |
| | Transfer Agent's Fees | | \$0 |
| | Printing and Engraving Costs | | \$ <u> </u> |
| | Legal Fees | | \$ <u>20,000</u> |
| | Accounting Fees | | \$ <u>2,000</u> |
| | Engineering Fees | | \$ <u> </u> |
| | Sales Commissions (specify finders' fees separately) | | \$ <u> </u> |
| | Other Expenses (identify) Miscellaneous (blue sky fees, duplicating, etc.) | | \$ <u>3,000</u> |
| | Total | ⊠ | \$ <u>25,000</u> |
| Th | is is a continuous offering. This amount is included as an estimate only | | |

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| | C. OFFERING PRICE, NUMBI | ER OF INVESTORS, EXPENSES AND USE | OF PROCEEDS | |
|---------|---|--|--|-------------------------|
| 5. | b. Enter the difference between the aggregat Question 1 and total expenses furnished in re difference is the "adjusted gross proceeds to Indicate below the amount of the adjusted gro | | *\$ <u>199,975,000</u> | |
| | be used for each of the purposes shown. If the | ne amount for any purpose is not known, left of the estimate. The total of the payments | | |
| | | | Payments to | |
| | | | Officers, Directors, & | Documents To |
| | | | Affiliates | Payments To Others |
| | Salaries and fees | | · 🗆 \$ | \$ |
| | Purchase of real estate | | . 🗆 \$ | □ \$ |
| | Purchase, rental or leasing and installation of | machinery and equipment | □ \$ | □ \$ |
| | | d facilities | | □\$ |
| | Acquisition of other businesses (including the | e value of securities involved in this offering | | |
| | that may be used in exchange for the assets o | | □\$ | □\$ |
| | * · | | | □ \$ |
| | | | □ Ψ | □\$ |
| | Other (specify): to be used as described in Iss | · | □ \$ □ \$ | □ \$ □ \$ |
| | | ······································ | | ω φ |
| | | | S | ∑ \$199,975,000* |
| | Column Totals | | \$ | \$199,975,000* |
| | Total Payments Listed (column totals added) | | \(\S\\\ \\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | |
| | | D. FEDERAL SIGNATURE | | |
| ollov | ing signature constitutes an undertaking by the | by the undersigned duly authorized person. It issuer to furnish to the U.S. Securities and Excany non-accredited investor pursuant to paragrap | hange Commissior | i, upon written reque |
| ssuer (| Print or Type) | Signature | A Date | |
| | EDDYSTONE FUND, L.P. | 6. Mun/ | 1 0 | 1/06/04 |
| Vame o | f Signer (Print or Type) | Title of Signer (Print or Type) | | |
| | s Ledwidge | Principal of Aegis Capital Partners, LLC, Ge | | |

* See asterisked comment on p.4.

ATTENTION

Intentional misstatements or omissions of act constitute federal criminal violations. (See 18 U.S.C. 1001.)